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Leaflet Regarding Rules of Publication.—CALIFORNIA AND
WESTERN MEDICINE has prepared a leaflet explaining its rules
regarding publication. This leaflet gives suggestions on the
preparation of manuscripts and of illustrations. It is suggested
that contributors to this Journal write to its offices requesting a
copy of this leaflet.

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EDITORIALS

ON RE-LOCATION OF PHYSICIANS IN CALI- FORNIA—IMPORTANT POLICY OUTLINED BY CALIFORNIA POSTWAR PLANNING COMMITTEE, THE C.M.A. PROCUREMENT AND ASSIGNMENT COMMITTEE FOR PHY- SICIANS, AND BY THE COUNCIL OF THE CALIFORNIA MEDICAL ASSOCIATION

**Location Problems Arising as Military Col-
leagues Are Mustered Out.**—As rapid demobi-
lization of the Armed Forces continues, an in-
creasing number of physicians on being mustered
out, are returning to civilian practice. It is natural
that the majority of these military colleagues
should be putting to themselves such questions as:

"Now that I have been mustered out, where do
I go from here?"

"In what place (state, city, town) can I locate
myself, to best conserve and promote my profes-
sional and also my family and personal interests?"

"Shall I return to the place where I was for-
merly in practice, or shall I consider a different
community, in either my former or in some other
State?"

Questions such as these are not easily answered.
They were serious problems at the end of World
War I; and at the present time, with V-E and
V-J days behind us, the more than 50,000 physi-
cians who have been in service in the Armed
Forces in World War II must come to decisions
in these matters.

* * *

**Organized Medicine is Also Confronted with
Re-location Problems.**—Above, mention has
been made of some of the decisions each return-
ing military colleague must make from the stand-
point of his individual relationships. However,
the present postwar situation includes elements
that extend beyond the personal.

Thus, Organized Medicine, acting through the
constituent state units and county medical socie-
ties must also put to their members, questions,
such as:

"Since, throughout the present World War, our
Associations have assured military colleagues that
their interests would be conserved and safe-
guarded by their civilian fellows, to what extent
will our State and County Medical Societies now
make good on these promises?"

Also,

"In what manner, can the State and County
Societies, through the collective endeavor of their

members, render the best aid to these brother physicians who are now returning to civilian practice; in the efforts of the latter again to build up practices, of nature and amount sufficient to meet immediate family and other needs, as well as lay foundations for future progress?"

* * *

Principles and Policies as Approved by C.M.A. Postwar Planning Committee and Council.—It is of these and associated problems now confronting Organized Medicine that comment is here made.

The task is made much easier for the OFFICIAL JOURNAL, since what may be called the California policy in these matters was outlined at a meeting of the C.M.A. Council held on October 21, 1945, in Los Angeles.

At that meeting the Council heard and considered a report given by its C.M.A. Postwar Planning Committee and the California Procurement and Assignment Committee for Physicians, submitted by P. A. Chairman Harold A. Fletcher.

The report was approved and should be carefully read by every C.M.A. member, since the principles and policies outlined therein are a joint responsibility, in which:

- (a) Physicians in civilian practice,
 - (b) Other physicians recently demobilized, and
 - (c) Others who still remain in military service,
- must join in mutual respect and effort to promote the proper interests of all concerned.

The report referred to appears in this issue of CALIFORNIA AND WESTERN MEDICINE, on page 228.

* * *

Basis of Action Taken by the Council.—Brief reference to conditions related to these matters and now confronting the California Medical Association and its County Societies may here be made. It is to be hoped that the justice of the decisions that have been reached will appeal to all physicians returning from military service, and who may be contemplating the establishment of themselves in civilian practice in one of the cities or communities of California.

One approach to a discussion of the California problems is to remember that returning military colleagues who left civilian practice to enter the Medical Corps of Army or Navy may be said to consist of two major groups:

- (1) California physician licentiates who were established in civilian practice in communities in this State at the time they entered military service; and
- (2) Physicians who left civilian practices in other States to enter military service, but who would now prefer, in reestablishing themselves, to take up medical practice in some place in California.

* * *

Nature of C.M.A. Request to its Own Returning California Military Colleagues.—The constituted authorities of the California Medical Association and the California P. and A. Committee for Physicians are asking all former Califor-

nia licentiates, (that is, for the time being and until demobilization is practically complete), to resume civilian practice in the same communities where they were established at the time they entered the Army or Navy. For, in their former communities, their fellow physicians and former patients and friends can the more easily coöperate in reestablishment of practice, without hardship or infringement on the rights of other military colleagues from the same communities, who may still be in service.

California physicians returning now from military duty, who would prefer some city or community other than that in which they formerly practiced, should understand that they could render a real disservice to some brother physician still in service, who was looking forward to the time when he could return to his pre-war location, then only to learn that his place had been preempted in part by a brother physician of his own State.

The justice of this request that each Doctor of Medicine (at least tentatively and temporarily) go back to his former seat of practice in California, should be apparent.

* * *

Applicability of Principles Involved to Out-of-State Colleagues.—Having indicated a rule of conduct that it is hoped California physicians will follow, in relation to the ethical rights and obligations to fellow California physicians still in military service, it is now in order to make comment concerning returning military physicians formerly in practice in other States, who would much prefer, when they again take up civilian practice, to establish themselves in a California city or community.

What has been said concerning the duty of a California physician coming out of Army or Navy may be said to apply with even more force to colleagues who were formerly in practice in other States, and who now aspire to California licensure and establishment of a medical practice in this State.

Of such, the number is not now in tens, nor even in hundreds. In fact, the figure of ten thousand physicians who are in military service and who hope to settle in California, has been given!

Certainly, half of that number, self-understandingly, would have a demoralizing effect upon medical practice in California!

But even if there were physicians in only tens or hundreds, the principles and policies outlined in the Postwar Planning Committee's statement and what has been above outlined, would still apply.

* * *

Location Problems Arise in All States—Fair Play to Colleagues Who Remain in Service Must be Maintained.—These Other-State physicians,—who, like California physicians who have been in military service have rendered noble aid to our soldiers and sailors,—could be confronted in the States in which they formerly practiced with situations exactly such as have arisen in many places in California.

Each of such Out-of-State physicians could properly ask himself this question:

"What would be my reaction if, on getting out of service, I went back to my former city or community of practice, to find that I would be in competition, not only with my former colleagues, but with a half-dozen or more new men from other in- or extra-state locations; who, while I have been in service, have been establishing themselves where I thought I might again take up my life work, without the travail such as I experienced during the years when I first went into civilian practice?"

* * *

Another group of military colleagues deserving of special consideration are those young physicians who were inducted into Army and Navy before they had ever established themselves in civilian practice. The procedure in regard to this group is indicated under Item 4 of the report, to which reference has been made. See in this issue, on page 229.

* * *

Moral and Other Suasion.—From what has been said, and what is so well outlined in Chairman Fletcher's report, it should not be difficult to agree that we deal here with what may be termed ethical principles and fair dealing, associated with special obligations to colleagues, who, having given their all through military service, should now have certain preferences or rights when they seek, as may be stated, to "get back their jobs in their former locations."

The C.M.A. Postwar Planning Committee report indicates along what lines the objectives mentioned above are to be implemented. That is the reason the report should be read by every C.M.A. member.

* * *

Procurement and Assignment Committees are Still Functioning.—The California and County Committees on Procurement and Assignment for Physicians are still functioning, and in these new problems in civilian practice, (just as in the last five years in military service) these Committees will decide whether a physician is "essential or non-essential" for a particular community.

If a physician is deemed non-essential for civilian practice in a certain community, a committee of the county medical society should meet with him, and courteously and diplomatically explain the local situation. Every county medical society in California should appoint such a committee.*

To put it in other words, if a physician who has been declared "non-essential" to a community,—(be he a former Californian or from some other State)—but who, nevertheless, insists on estab-

lishing himself, he would probably in due time learn, in taking such a course, he had surrounded himself with isolation barriers that would not have become operative had he returned to his pre-war location; and of a nature that might seriously handicap him in his professional and other advancement.

* * *

Publicity Concerning These C.M.A. Policies is Desirable.—Copies of the C.M.A. Postwar Planning Committee report have been forwarded to the Secretary of the American Medical Association, with the suggestion that proper publicity be given thereto in the *Journal of the American Medical Association*, so that physicians elsewhere may be in better position to orient themselves concerning the medical practice situation in California.

If physicians, both in military service and civilian practice, adequately understand the problems, coöperation may be expected, and the rights of all will be promoted to best advantage.

CALIFORNIA MEDICAL ASSOCIATION WILL HOLD ITS 75TH ANNUAL SESSION IN LOS ANGELES—A.M.A. IN SAN FRANCISCO IN 1946

The Next C.M.A. Annual Session Will be Held on May 7-8-9-10, 1946.—At the 329th meeting of the C.M.A. Council, held in Los Angeles on October 21st, it was voted to make next year's annual session, a regular four-day meeting.

Hotel Biltmore in Los Angeles will again be the headquarters (Hotel Del Monte at Monterey is still in possession of the Navy).

Meetings will begin on Tuesday, May 7, 1946 and continue through Friday noon, May 10.

Owing to crowded hotel accommodations, and because of existing conditions in civilian and military practice, no scientific exhibits will be shown.

However, commercial and technical exhibits will be displayed.

Members of the California Medical Association are requested to make notes of the days on their appointment books, and to arrange professional schedules and appointments, to permit attendance at some, if not all meetings.

Section officers, who will be happy to receive suggestions from civilian and military colleagues in California concerning topics for individual papers, symposia and panel conferences, may be addressed direct, or through the Association Secretary, who through by-law provision, is chairman of the Committee on Scientific Work that has charge of the coördination of programs of general and section meetings.

* * *

A.M.A. House of Delegates will meet in Chicago in December, 1945. Next Regular Session in San Francisco in 1946. Date to be Selected Later.—The American Medical Association will hold no scientific assemblies or meetings in the present year, 1945.

* On methods of procedure that County Medical Society P. and A. Committees could use to advantage, see in this issue the letter of the Chairman of the Santa Clara County Medical Society P. and A. Committee, on page 229.